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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
1.	Your full name	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Janice First name L. Middle name Martindale Last name and Suffix (Sr., Jr., II, III)	Brandon First name J. Middle name Martindale Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	FKA Janice L. Calvert	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0096	xxx-xx-6267

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Desc Main

Janice L. Martindale Debtor 1 Debtor 2 Brandon J. Martindale

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	■ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5. Where you live		2618 Myang Ave.	If Debtor 2 lives at a different address:			
		McHenry, IL 60050 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		McHenry				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6. Why you are choosing this district to file for bankruptcy		Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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	otor 1 otor 2	Janice L. Martinda Brandon J. Martin					Case number (if known)		
Par	rt 2:	Tell the Court About \	Your Bank	ruptcy Ca	ase				
7. The chapter of the Bankruptcy Code you are		•				h, see <i>Notice Required</i> and check the appropri	by 11 U.S.C. § 342(b) for Individuals Filinitate box.	ng for Bankruptcy	
	choc	choosing to file under		ter 7					
			□ Chap						
				ter 12					
			☐ Chap	ter 13					
8.	How	you will pay the fee			e entire fee when I file my petition. Please check with the clerk's office in your local court for more ou may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or				
				der. If your pre-printed		your payment on your b	ehalf, your attorney may pay with a cred	it card or check with	
				eed to pa	y the fee in installme		ption, sign and attach the Application for	Individuals to Pay	
			☐ I re	equest that t is not rec plies to yo	uired to, waive your fe ur family size and you	You may request this op e, and may do so only if are unable to pay the fe	tion only if you are filing for Chapter 7. B your income is less than 150% of the of e in installments). If you choose this opti official Form 103B) and file it with your pe	ficial poverty line that on, you must fill out	
9.	Have you filed for		■ No.						
		bankruptcy within the last 8 years?	☐ Yes.						
				District		When	Case number		
				District		When	Case number		
				District		When	Case number		
10.		any bankruptcy	■ No						
	filed not f you,	s pending or being by a spouse who is iling this case with or by a business ner, or by an ate?	☐ Yes.						
				Debtor			Relationship to you		
				District		When	Case number, if known		
				Debtor			Relationship to you		
				District		When	Case number, if known		
11.		ou rent your	■ No.	Go to	line 12.				
	resid	lence?	☐ Yes.	Has yo	our landlord obtained a	n eviction judgment aga	inst you and do you want to stay in your	residence?	
					No. Go to line 12.				
						atement About an Eviction	on Judgment Against You (Form 101A) a	and file it with this	
					bankruptcy petition.		· · · · · · · · · · · · · · · · · · ·		

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Janice L. Martindale

Case number (if known)

Pari	t 3: Report About Any Bu	sinesses	You Owr	as a Sole Proprie	tor			
	Are you a sole proprietor of any full- or part-time business?	■ No.		Part 4.				
		☐ Yes.	Name	and location of bus	siness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any					
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, Sta	te & ZIP Code			
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:			
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the above	е			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> <i>debtor?</i>	deadlines operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).					
	For a definition of small	No.	I am i	I am not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankrupto Code.					
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat	☐ Yes.						
	of imminent and identifiable hazard to public health or safety?		What is	the hazard?				
	Or do you own any property that needs immediate attention?			diate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?				
					Number, Street, City, State & Zip Code			

Debtor 1

Debtor 2 Brandon J. Martindale

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Debtor 1 Janice L. Martindale
Debtor 2 Brandon J. Martindale

Case number (if known)

Dark	E.
Part	ю.

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

3/17/17 10:43AM

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about of	credit
counseling because of:	

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-80607

Debtor 1

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Janice L. Martindale Debtor 2 **Brandon J. Martindale** Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under ☐ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for □ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **25,001-50,000** 1-49 you estimate that you **5001-10.000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50.000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10.000.000.001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million 20. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$1,000,000,001 - \$10 billion □ \$10,000,001 - \$50 million □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Janice L. Martindale /s/ Brandon J. Martindale Janice L. Martindale Brandon J. Martindale Signature of Debtor 1 Signature of Debtor 2 Executed on March 17, 2017 Executed on March 17, 2017 MM / DD / YYYY MM / DD / YYYY

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Janice L. Martindale Brandon J. Martindale Page 7 of 50

Case number (if known)

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For your attorney, if you are represented by one

Debtor 1 Debtor 2

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jaime I	Dowell	Date	March 17, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
Jaima Day			
Jaime Dov	weii		
Printed name			
McKenna	Storer		
Firm name			
1004 Cour	taulds Dr.		
Suite A			
Woodstoo	k, IL 60098		
Number, Street,	City, State & ZIP Code		
Contact phone	815-334-9690	Email address	Debtor@mckenna-law.com
6281312			
Bar number & S	tate		

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Fill in this information to identify your case:

Debtor 1 Janice L. Martindale
First Name Middle Name Last Name

Debtor 2 Brandon J. Martindale
(Spouse if, filing) First Name Middle Name Last Name

NORTHERN DISTRICT OF ILLINOIS

☐ Check if this is an amended filing

Official Form 106Sum

United States Bankruptcy Court for the:

Case number

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	2,700.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	2,700.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	18,644.00
	Your total liabilities	\$	18,644.00
Par	t 3: Summarize Your Income and Expenses	-	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,186.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,166.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other scl	nedules.
7.	Yes What kind of debt do you have?		

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Janice L. Martindale Document Page 9 of 50

Brandon J. Martindale	Case number (if known)			

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Debtor 1

Document Page 10 of 50 Fill in this information to identify your case and this filing: Debtor 1 Janice L. Martindale Middle Name Last Name First Name Debtor 2 Brandon J. Martindale (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ■ No ☐ Yes 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00 pages you have attached for Part 2. Write that number here......=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$1,000.00 Misc. household goods - Storage Unit

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

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Document

Debtor 1 Debtor 2	Janice L. Martind Brandon J. Martin		Case number (i	f known)
	Tel	evision		\$300.00
Example ■ No		nes; paintings, prints, or other artwo nemorabilia, collectibles	rk; books, pictures, or other art objects; star	np, coin, or baseball card collections;
Example No □	nent for sports and ho les: Sports, photograph musical instrument Describe	ic, exercise, and other hobby equip	ment; bicycles, pool tables, golf clubs, skis;	canoes and kayaks; carpentry tools;
■ No		guns, ammunition, and related equi	ipment	
□ No		furs, leather coats, designer wear,	shoes, accessories	
	We	aring Apparel		\$300.00
□ No	Describe	dding Rings	s, wedding rings, heirloom jewelry, watches,	\$1,000.00
Exam _i ■ No □ Yes. 14. Any of ■ No	arm animals ples: Dogs, cats, birds, Describe ther personal and hou	sehold items you did not already	list, including any health aids you did no	ot list
		of your entries from Part 3, includer here	ding any entries for pages you have attac	hed \$2,600.00
	escribe Your Financial As wn or have any legal c	sets r equitable interest in any of the	following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No		n your wallet, in your home, in a saf	e deposit box, and on hand when you file yo	
			Cash	\$100.00

Desc Main Case 17-80607 Doc 1 Filed 03/17/17 Entered 03/17/17 10:46:53 Page 12 of 50 Document Debtor 1 Janice L. Martindale Debtor 2 **Brandon J. Martindale** Case number (if known) 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... **Desposit Debit** Greendot \$0.00 17.1. Card 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Yes. List each account separately. Type of account: Institution name: 401K Unknown 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes.....

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No ☐ Yes.....

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No

☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

☐ Yes. Give specific information about them...

Desc Main Case 17-80607 Doc 1 Filed 03/17/17 Entered 03/17/17 10:46:53 Page 13 of 50 Document Debtor 1 Janice L. Martindale Debtor 2 **Brandon J. Martindale** Case number (if known) 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information...

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$100.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.

☐ Yes. Go to line 38.

page 4

Debt		Janice L. Martindale	ı Page 14 01		
Debi	tor 2	Brandon J. Martindale		Case number (if known)	
Part		scribe Any Farm- and Commercial Fishing-Related Property Yo ou own or have an interest in farmland, list it in Part 1.	u Own or Have an Intere	est In.	
46. C	Do you	own or have any legal or equitable interest in any farm	n- or commercial fishi	ng-related property?	
	No.	Go to Part 7.			
	☐ Yes.	. Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
	<i>Examp</i> No	have other property of any kind you did not already lisules: Season tickets, country club membership Give specific information	rt?		
54.	Add t	he dollar value of all of your entries from Part 7. Write t	hat number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$0.00
56.	Part 2	2: Total vehicles, line 5	\$0.00		
57.	Part 3	3: Total personal and household items, line 15	\$2,600.00		
58.	Part 4	l: Total financial assets, line 36	\$100.00		
59.	Part 5	i: Total business-related property, line 45	\$0.00		
60.	Part 6	6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54	+\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$2,700.00	Copy personal property to	\$2,700.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$2,700.00

		Docume	eni Page 15 oi 5	<u>U</u>	
Fill in this informa	tion to identify your	case:			
Debtor 1	Janice L. Martind	ale			
	First Name	Middle Name	Last Name		
Debtor 2	Brandon J. Martir	ndale			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number					☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify th	e Property	You Claim a	s Exempt
---------	-------------	------------	-------------	----------

1.	Which set of exemption	ons are you claiming	? Check one only	, even if your s	spouse is filing with y	vou.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

the Amo		
	ount of the exemption you claim	Specific laws that allow exemption
om <i>Che</i>	eck only one box for each exemption.	
.00	\$1,000.00	735 ILCS 5/12-1001(b)
	100% of fair market value, up to any applicable statutory limit	
.00	\$300.00	735 ILCS 5/12-1001(b)
	100% of fair market value, up to any applicable statutory limit	
.00	100%	735 ILCS 5/12-1001(a)
	100% of fair market value, up to any applicable statutory limit	
.00	\$1,000.00	735 ILCS 5/12-1001(b)
	100% of fair market value, up to any applicable statutory limit	
	£400.00	735 ILCS 5/12-1001(b)
.00 ■	\$100.00	, ,
-	00	\$1,000.00 100% of fair market value, up to any applicable statutory limit \$300.00 100% of fair market value, up to any applicable statutory limit 100% of fair market value, up to any applicable statutory limit 100% of fair market value, up to any applicable statutory limit 100% of fair market value, up to any applicable statutory limit

Entered 03/17/17 10:46:53 Filed 03/17/17 Desc Main Page 16 of 50 Document Janice L. Martindale Debtor 1 Brandon J. Martindale Case number (if known) Debtor 2 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Official Form 106C

Case 17-80607

Yes

Doc 1

			<u> </u>	U	
Fill in this infor	mation to identify your	case:			
Debtor 1	Janice L. Martind	ale			
	First Name	Middle Name	Last Name		
Debtor 2	Brandon J. Martii	ndale			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an
,					amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

	Case 17-80607 D	oc 1 Filed 03/17/1 Document	17 Entered 03/17/17 10:46:53 Page 18 of 50	B Desc Main 3/17/17 10:43A
Fill in th	is information to identify your o			
Debtor 1	Janice L. Martinda	ale		
	First Name	Middle Name	Last Name	
Debtor 2			Lord Mana	
(Spouse if,	filing) First Name	Middle Name	Last Name	
United S	tates Bankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS	
Case nu	mber			
(if known)				☐ Check if this is an
				amended filing
Officio	l Form 106E/F			
		ha Uaya Ubaasiira	d Claima	12/15
	lule E/F: Creditors W		CIGITIS RITY claims and Part 2 for creditors with NONPRI	
	n the Continuation Page to this page case number (if known). List All of Your PRIORITY Unstable 1	•	report in a Part, do not file that Part. On the top o	of any additional pages, write your
1. Do ai	ny creditors have priority unsecured	d claims against you?		
■ N	o. Go to Part 2.			
☐ Ye	es.			
Part 2:	List All of Your NONPRIORITY	Y Unsecured Claims		
3. Do aı	ny creditors have nonpriority unsec	ured claims against you?		
□ N	o. You have nothing to report in this pa	art. Submit this form to the court w	rith your other schedules.	
Y	es.			
unse	cured claim, list the creditor separately one creditor holds a particular claim, list	for each claim. For each claim lis	f the creditor who holds each claim. If a creditor hat ted, identify what type of claim it is. Do not list claims but have more than three nonpriority unsecured claims.	already included in Part 1. If more
				Total claim
4.1	A/r Concepts	Last 4 digits of a	account number 7579	\$260.00
	Nonpriority Creditor's Name	When we the de		
_	18-3 E Dundee Rd Barrington, IL 60010	When was the de	ept incurred?	
	Number Street City State Zlp Code	As of the date yo	ou file, the claim is: Check all that apply	
'	Who incurred the debt? Check one.			
I	Debtor 1 only	☐ Contingent		
ı	Debtor 2 only	☐ Unliquidated		
ı	Debtor 1 and Debtor 2 only	☐ Disputed		
ı	\square At least one of the debtors and ano	ther Type of NONPRI	ORITY unsecured claim:	
	\square Check if this claim is for a comm			
	debt s the claim subject to offset?	Obligations ar	ising out of a separation agreement or divorce that you	ou did not
_	No		ion or profit-sharing plans, and other similar debts	
	■ No □ Yes		Anesthesia Assoc Crystal Val	
	→ res	Other. Specify	Allesillesia Assoc Ciysiai vai	

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Debtor 2 Brandon J. Martindale Case number (if know) 4.2 A/r Concepts Last 4 digits of account number 7578 \$160.00 Nonpriority Creditor's Name 18-3 E Dundee Rd When was the debt incurred? Barrington, IL 60010 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Anesthesia Assoc Crystal Val ☐ Yes 4.3 A/r Concepts 7267 \$76.00 Last 4 digits of account number Nonpriority Creditor's Name 18-3 E Dundee Rd When was the debt incurred? Barrington, IL 60010 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Mchenry Radiologists Imaging ☐ Yes 4.4 Americollect Inc \$1,672.00 Last 4 digits of account number 0522 Nonpriority Creditor's Name Po Box 1566 Opened 07/16 Last Active 1851 S Alverno Rd When was the debt incurred? 8/25/16 Manitowoc, WI 54221 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Mercy Health System ☐ Yes

Debtor 1 Janice L. Martindale

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Debtor 1 Janice L. Martindale Debtor 2 Brandon J. Martindale Case number (if know) 4.5 \$28.00 Americollect Inc Last 4 digits of account number 0205 Nonpriority Creditor's Name Po Box 1566 When was the debt incurred? **Opened 07/16** 1851 S Alverno Rd Manitowoc, WI 54221 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Mercy Health System ☐ Yes 4.6 **Armor Systems Co** Last 4 digits of account number 8970 \$151.00 Nonpriority Creditor's Name 1700 Kiefer Dr When was the debt incurred? **Opened 01/17** Ste 1 Zion, IL 60099 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney Gastroenterology ☐ Yes Other. Specify **Internal Me** 4.7 Capital One Last 4 digits of account number \$880.00 3468 Nonpriority Creditor's Name Opened 11/09 Last Active Attn: General Correspondence/Bankruptcy When was the debt incurred? 10/12/11 Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

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Debtor 1 Janice L. Martindale Debtor 2 Brandon J. Martindale Case number (if know) 4.8 **CCI/Contract Callers Inc** \$938.00 Last 4 digits of account number 1771 Nonpriority Creditor's Name Po Box 3000 When was the debt incurred? Augusta, GA 30903 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify 10 Commonwealth Edison Company ☐ Yes 4.9 Centegra Health System Unknown Last 4 digits of account number 2433 Nonpriority Creditor's Name Centegra Hospital - Woodstock When was the debt incurred? 2016 PO Box 1990 Woodstock, IL 60098 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Services Collections** 4.1 **Certified Services Inc** \$59.00 484A Last 4 digits of account number 0 Nonpriority Creditor's Name Po Box 177 When was the debt incurred? **Opened 07/11** Waukegan, IL 60079 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Dhamvir Verma M.D. ☐ Yes

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Desc Main Case 17-80607 Document Page 22 of 50 Debtor 1 Janice L. Martindale Debtor 2 Brandon J. Martindale Case number (if know) 4.1 Credit Management, LP 8440 \$99.00 Last 4 digits of account number Nonpriority Creditor's Name The Offices of Credit Management, When was the debt incurred? **Opened 06/16** LP Po Box 118288 Carrolton, TX 75011 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Comcast Central** Other. Specify ☐ Yes Warehouse 4 1 **ERC/Enhanced Recovery Corp** 3143 \$244.00 Last 4 digits of account number Nonpriority Creditor's Name **Opened 01/14** 8014 Bayberry Rd When was the debt incurred? Jacksonville, FL 32256 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Collection Attorney Tmobile 4.1 H & R Accounts, Inc Last 4 digits of account number 8903 \$5,346.00 Nonpriority Creditor's Name Po Box 672 When was the debt incurred? **Opened 12/15** Moline, IL 61265 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

■ No

debt

report as priority claims

Other. Specify

 \square Obligations arising out of a separation agreement or divorce that you did not

Collection Attorney Centegra Hospital-

 \square Debts to pension or profit-sharing plans, and other similar debts

Mchenry

Is the claim subject to offset?

Desc Main Case 17-80607 Doc 1 Filed 03/17/17 Entered 03/17/17 10:46:53 Page 23 of 50 Document Debtor 1 Janice L. Martindale Debtor 2 Brandon J. Martindale Case number (if know) 4.1 H & R Accounts, Inc 5486 \$5,200.00 Last 4 digits of account number 4 Nonpriority Creditor's Name Po Box 672 When was the debt incurred? **Opened 06/16** Moline, IL 61265 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Centegra Hospital-☐ Yes Other. Specify **Mchenry** 4.1 H & R Accounts, Inc 2156 \$2,174.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 672 When was the debt incurred? **Opened 12/15** Moline, IL 61265 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Centegra Hospital-**☐ Yes Other. Specify **Mchenry** 4.1 5527 H & R Accounts, Inc \$653.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 672 When was the debt incurred? **Opened 06/16** Moline, IL 61265 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

■ Other. Specify Mchenry

report as priority claims

 \square Obligations arising out of a separation agreement or divorce that you did not

Collection Attorney Centegra Hospital-

lacksquare Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Debtor 1 Janice L. Mart Debtor 2 Brandon J. M			Case number (if know)		
H&R Accounts I		Last 4 digits of account number	2433	Unknown	
Nonpriority Creditor's 7017 John Deer Moline, IL 61265	e Parkway	When was the debt incurred?	2016		
Number Street City Si Who incurred the de	tate Zlp Code	As of the date you file, the claim	is: Check all that apply		
☐ Debtor 1 only		☐ Contingent			
☐ Debtor 2 only		☐ Unliquidated			
■ Debtor 1 and Debt	tor 2 only	☐ Disputed			
☐ At least one of the	debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this clai	m is for a community	☐ Student loans			
debt Is the claim subject	to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
■ No		☐ Debts to pension or profit-sharin	g plans, and other similar debts		
☐ Yes		Other. Specify Collections	i		
4.1 8 Oac	Nome	Last 4 digits of account number	8719	\$272.00	
Attn: Bankrupto Po Box 500					
Baraboo, WI 539 Number Street City St		As of the date you file, the claim	is: Check all that apply		
Who incurred the de	•	7.0 or the date you me, the claim	or chook all that apply		
Debtor 1 only		☐ Contingent			
■ Debtor 2 only		☐ Unliquidated			
☐ Debtor 1 and Debt	tor 2 only	☐ Disputed			
☐ At least one of the	•	Type of NONPRIORITY unsecured	d claim:		
_	m is for a community	☐ Student loans			
debt	in is for a community	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not		
Is the claim subject	to offset?	report as priority claims	,		
■ No		☐ Debts to pension or profit-sharing	g plans, and other similar debts		
☐ Yes		Other. Specify Mchenry R	adiologists And Ima		
4.1 9 Oac		Last 4 digits of account number	8958	\$70.00	
Nonpriority Creditor's Attn: Bankrupto		When was the debt incurred?			
Po Box 500	, y	When was the debt meaned.			
Baraboo, WI 539	913				
Number Street City St		As of the date you file, the claim	is: Check all that apply		
Who incurred the de	ebt? Check one.				
Debtor 1 only		☐ Contingent			
Debtor 2 only		☐ Unliquidated			
Debtor 1 and Debt	tor 2 only	☐ Disputed			
☐ At least one of the	e debtors and another	Type of NONPRIORITY unsecured	d claim:		
	m is for a community	☐ Student loans			
debt Is the claim subject	to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
■ No		☐ Debts to pension or profit-sharin	g plans, and other similar debts		
☐ Yes		Other. Specify Mchenry R	adiologists And Ima		

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Document Page 25 of 50 Debtor 1 Janice L. Martindale Debtor 2 Brandon J. Martindale Case number (if know) Stanislaus Credit Control Service, 4.2 45N1 0 \$362.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Po Box 480 Modesto, CA 95353 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Cep America Illinois ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address **H&R Accounts Inc.** 7017 John Deere Parkway

Moline, IL 61265

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Total Claim

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				otal Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 18,644.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 18,644.00

		Docume	eni Paue zo oi si	
Fill in this inform	mation to identify your	case:		
Debtor 1	Janice L. Martind	lale		
	First Name	Middle Name	Last Name	
Debtor 2	Brandon J. Martii	ndale		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code					State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.5					_
	Name				
	Number	Street			
	City		State	ZIP Code	_

	Case 11-00001	Doc 1 Tiled 03/1		os/17/17 10.40.55	3/17/17 10:43AF
Fill in thi	s information to identify yo				
Debtor 1	Janice L. Marti	ndale			
	First Name	Middle Name	Last Name		
Debtor 2	Brandon J. Mai				
(Spouse if, f	iling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the	: NORTHERN DISTRICT	OF ILLINOIS		
Case nur	mber				
(if known)					☐ Check if this is an amended filing
					amended ming
Officia	al Form 106H				
	dule H: Your Co	dehtors			12/15
50110	daic II. Toul Go	deptors			12/13
ill it out, our nam	e ming together, both are e and number the entries in t e and case number (if know b you have any codebtors?	he boxes on the left. Attaci vn). Answer every question	n the Additional Page t	o this page. On the top of a	ed, copy the Additional Page, any Additional Pages, write
1. 50	you have any codesions.	(ii you are illing a joint case,	do not list citrici spouse	as a couchtor.	
■ No					
☐ Ye	es				
	ithin the last 8 years, have yona, California, Idaho, Louisia				es and territories include
■ No	o. Go to line 3.				
□ Ye	es. Did your spouse, former sp	pouse, or legal equivalent live	e with you at the time?		
in lir Forn	ie 2 again as a codebtor onl	y if that person is a guaran	tor or cosigner. Make	sure you have listed the cr	h you. List the person shown editor on Schedule D (Official edule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and	d ZIP Code		Column 2: The creditor Check all schedules that	r to whom you owe the debt at apply:
3.1				☐ Schedule D, line	
0.1	Name			☐ Schedule E/F, line	
				☐ Schedule G, line _	
	Number Street			_	
	City	State	ZIP Code		
				Cohodel D. P.	
3.2	Name			Schedule D, line	
				☐ Schedule E/F, line ☐ Schedule G, line _	
				— Scriedule G, IIIIe _	
	Number Street City	State	ZIP Code		
	-				

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Fill	in this information to i	dentify your c	ase.				
		Janice L. Ma					
	otor 2	Brandon J. I	Martindale				
Uni	ted States Bankruptcy	Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS			
Cas	se number				Che	eck if this is:	
(If kr	nown)			-		An amended filing	
						A supplement showing postpetition chapt 13 income as of the following date:	er
0	fficial Form 1	06I				MM / DD/ YYYY	
S	chedule I: Y	our Inc	ome			1	2/15
sup spo atta	plying correct inform use. If you are separ ch a separate sheet	nation. If you ated and you	are married and not fill r spouse is not filing w	ng jointly, and your spouse is livith you, do not include informati	ing wit	btor 2), both are equally responsible for h you, include information about your ut your spouse. If more space is neede number (if known). Answer every ques	ed,
1.	Fill in your employ information.	ment		Debtor 1		Debtor 2 or non-filing spouse	
	If you have more that	an one job,		■ Employed		■ Employed	
	attach a separate pa		Employment status	☐ Not employed		☐ Not employed	
	employers.		Occupation	Sales Assoc.		Sales Assoc.	
	Include part-time, seasonal, or self-employed work. Employer's name		Wal-Mart		R.A. Adams Enterprises		
	Occupation may inc	lude student	Employer's address	702 C W 9th Ct Pontonvil	lo.	2600 II 420	

Give Details About Monthly Income

or homemaker, if it applies.

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

How long employed there?

702 S.W. 8th St. Bentonville

Bentonville, AR 72716

2 yrs

2600 IL-120

McHenry, IL 60051

3 yrs

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 718.00 3,381.00 2. deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. 0.00 +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 718.00 3,381.00

Desc Main Case 17-80607 Doc 1 Filed 03/17/17 Entered 03/17/17 10:46:53

Page 29 of 50 Document Janice L. Martindale Debtor 1 Debtor 2 Brandon J. Martindale Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 4. 718.00 3,381.00 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 5a. 136.00 642.00 Mandatory contributions for retirement plans 5b. 5b. \$ 0.00 \$ 0.00 Voluntary contributions for retirement plans 5c. 5c. \$ 0.00 135.00 Required repayments of retirement fund loans 5d. 5d. \$ 0.00 0.00 5e. Insurance 5e. 0.00 0.00 5f. **Domestic support obligations** 5f. 0.00 0.00 5g. **Union dues** 5g. \$ 0.00 \$ 0.00 Other deductions. Specify: 5h.+ \$ 0.00 \$ 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 136.00 777.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. \$ 582.00 \$ 2,604.00 List all other income regularly received: Net income from rental property and from operating a business, profession, or farm t for each areasety and business abouting areas 9. 10. 11. 12.

Write appli	I the amount in the last column of line 10 to the amount in line 11. The e that amount on the Summary of Schedules and Statistical Summary of Colies you expect an increase or decrease within the year after you file this for No. Yes. Explain:	ertain Liabi				12. \$ Combine monthly	ed .
Add Write	e that amount on the Summary of Schedules and Statistical Summary of Co						3,186.00
Spec	I the amount in the last column of line 40 to the amount in line 44. The		a com	hinad monthly in			
Incluothe	te all other regular contributions to the expenses that you list in Scheoude contributions from an unmarried partner, members of your household, your friends or relatives. Into tinclude any amounts already included in lines 2-10 or amounts that are cify:	our depen		•		nedule J. 11. +\$	0.00
Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				•		
Calc	culate monthly income. Add line 7 + line 9.	10. \$		582.00 + \$	2,60	4.00 = \$	3,186.00
Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	
8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	0.00	
8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	Include cash assistance and the value (if known) of any non-cash assistathat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.	\$	0.00	\$	0.00	
8f.	Other government assistance that you regularly receive		· 		· —		
8e.	Social Security	8e.	\$	0.00	\$	0.00	
8d.	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c. 8d.	\$	0.00	\$	0.00	
8c.	Family support payments that you, a non-filing spouse, or a depend regularly receive	ent					
	Interest and dividends	8b.	\$	0.00	\$	0.00	
8b.	receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	

13.

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Fill	in this informa	ation to identify yo	our case:						
Deb	otor 1	Janice L. Ma	rtindale				eck if this		
Debtor 2 Brandon J. Martindale (Spouse, if filing)							A suppl		wing postpetition chapter the following date:
Unit	ed States Bank	ruptcy Court for the	: NORTH	ERN DISTRICT OF ILLING	OIS		MM / D	D / YYYY	
l	e number nown)								
O	fficial Fo	orm 106J				I			
		J: Your							12/1
info	ormation. If m		eded, atta	If two married people ar ch another sheet to this t n.					
Par 1.	t 1: Desc	ribe Your House	ehold						
	□ No. Go to								
	_	es Debtor 2 live	in a separ	ate household?					
	■ N		st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of De	ebtor 2.		
2.	Do you hav	e dependents?	□ No						
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dep age	endent's	Does dependent live with you?
	Do not state	the							□ No
	dependents	names.			Daughter		1.5	yrs	Yes
									□ No □ Yes
					-				□ No
									☐ Yes
									□ No
									☐ Yes
3.	expenses of	penses include f people other t d your depende	nan $_{\square}$	No Yes					
		ate Your Ongoi							
exp				uptcy filing date unless y y is filed. If this is a supp					
the		h assistance an		government assistance it luded it on <i>Schedule I:</i> Y				Your exp	enses
4.		or home owners and any rent for th		ses for your residence. In r lot.	nclude first mortgage	e 4.	\$		500.00
	If not include	ded in line 4:							
	4a. Real	estate taxes				4a.	·		0.00
	•	rty, homeowner's				4b.			0.00
		e maintenance, re eowner's associa		pkeep expenses		4c. 4d.			0.00
	TG. 110111C	omioi o associa	01 00110	ACTIVITION AUGG		¬u.	Ψ		0.00

5. Additional mortgage payments for your residence, such as home equity loans

6. Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, gathage collection 6c. Telephone, cell phone, interinet, statellite, and cable services 6c. \$ 190,00 6d. Other, Specify. 6d. \$ 0,00 7. Food and housekeeping supplies 7. Food and housekeeping supplies 8. \$ 0,00 8. Chiting, laundry, and dry's cleaning 9. \$ 100,00 9. Clothing, laundry, and dry's cleaning 9. \$ 100,00 9. Clothing, laundry, and dry's cleaning 9. \$ 100,00 9. Clothing, laundry, and dry's cleaning 10. \$ 220,00 10. Personal care producted services 10. \$ 220,00 10. Personal care producted services 11. \$ 125,00 11. Transportation, leading gas, maintenance, bus or train fare. 12. \$ 150,00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 50,00 14. \$ 0,00 15. Insurance. 15. Insurance. 15. Life insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. \$ 75,00 15c. \$ 75,00 15d. Other insurance. Specify: 15d. S 0,00 15d. Other insurance specific insurance 15d. Other insurance specific insurance 15d. Other insurance specific insurance 15d. Other insurance insurance deducted from your pay or included in lines 4 or 20. 15g. Life insurance 15c. \$ 75,00 15d. Other insurance, specify: 15d. S 0,00 15d. Other insurance specific insurance insuran			Janice L Brandon					Case num	nber (if known)	
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64. Chier. Specity. Food and housekeping supplies 7		6b. \	Water, sev	ver, ga	rbage collection			6b.	\$	0.00
7. Food and housekeeping supplies Childcare and children's education costs Childcare and derival expenses Childcare products and services Childcare and derival expenses Childcare products and services Childcare and derival expenses Childcare and children's education control contr		6c.	Telephone	, cell p	hone, Internet,	satellite, and cable	services	6c.	\$	190.00
8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. \$ 100.00 10. Personal care products and services 11. \$ 125.00 11. Medical and dental expenses 11. \$ 125.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 50.00 14. Charitable contributions and religious donations 14. \$ 0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. \$ 0.00 15b. Health insurance 15c. \$ 75.00 15c. Vehicle 1 7c. \$ 50.00 17c. Other. Specity: Storage Unit 7c. \$ 50.00 17b. Car payments for Vehicle 1 17c. Specity: Storage Unit 7c. \$ 50.00 17c. Other. Specity: Storage Unit 7cc. \$ 50.00 17c. Other. Specity: Storage Unit 7cc. \$ 50.00 17c. Other. Specity: Storage Unit 7cc. \$ 50.00 17c. Other. Specity: Other payments of almony, maintenance, and support that you did not report as deducted from your pay on line \$ 50.00 15c. Vehicle 1 7cc. Vehicle 1 7cc. \$ 50.00 15c. Vehicle 1 7cc. Vehicle 1 7cc. \$ 50.00 15c. Vehic		6d. (Other. Spe	cify:				6d.	\$	0.00
Clothing, laundry, and dry cleaning	7.	Food a	and house	ekeepi	ng supplies			7.	\$	500.00
10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$ 150.00 13. Transportation. Include gas, maintenance, bus or train fare. 14. \$ 50.00 15. Charitable contributions and religious donations 16. Charitable contributions and religious donations 17. \$ 50.00 18. Life insurance 18. \$ 0.00 19. The insurance deducted from your pay or included in lines 4 or 20. 19. Life insurance deducted from your pay or included in lines 4 or 20. 19. Life insurance 150. \$ 0.00 19. Life	8.	Childc	are and c	hildre	n's education c	osts		8.	\$	0.00
11. Medical and dental expenses 2	9.	Clothir	ng, laund	ry, and	I dry cleaning			9.	\$	100.00
12. Transportation. Include gas, maintenance, bus or train fare. 12. \$ 150.00	10.	Persor	nal care p	roduc	ts and services			10.	\$	20.00
Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 1. Entertainment, clubs, recreation, newspapers, magazines, and books 1. Charitable contributions and religious donations 1. Sources Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Leath insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Sources 15d. So	11.	Medica	al and der	ntal ex	penses			11.	\$	125.00
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14. \$ 0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Vehicle insurance 17d. Vehicle		Do not	include ca	ar payn	nents.			12.	\$	150.00
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Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 17c. Vehicle ins	14.	Charita	able cont	ributio	ns and religiou	s donations		14.	\$	0.00
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15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: 15d. Step insurance. Specify: 16c. Specify: 16c. Specify: 17d. Car payments for Vehicle 1 17a. Car payments for Vehicle 2 17b. Specify: 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18 Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106). 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106). 19. Other payments you make to support others who do not live with you. Specify: Non-Court Ordered Support for minor 19. 20. Mortgages on other property 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Specify: 20c. Property, homeowner's or renter's insurance 20c. Specify: 20c. Property, homeowner's association or condominium dues 20c. Specify: 21. +\$ 0.00 21. +\$ 0.00 22. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses form your monthly expenses form your monthly expenses form your monthly expenses from your monthly expenses from your monthly expenses from your monthly expenses from your monthly income. 23c. Currently expenses from your monthly income. 23c. Subtract your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your car loan within the year after you file this form? For example, do you expect to finish paying for your car loan within the year of do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?					e deducted from	n your pay or includ	ded in lines 4 or 20.	45-	Φ.	
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Fill in this infor	rmation to identify your	case:			
Debtor 1	Janice L. Martind				
20010	First Name	Middle Name	Last Name		
Debtor 2	Brandon J. Martir				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					ck if this is an nded filing
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	gn Below				
	ay or agree to pay some	one who is NOT an attor	ney to help you fill out bankrup	ptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Petition Declaration, and Signature	
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules filed with	this declaration and	
X /s/ .lar	nice L. Martindale		X /s/ Brandon J. M	artindale	
Janice	e L. Martindale		Brandon J. Marti	indale	
Signatu	ure of Debtor 1		Signature of Debtor	2	
Date	March 17, 2017		Date March 17.	2017	

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Fill in t	this information	n to identify you	r case:							
Debtor	1 Ja	nice L. Martin	dale							
	Firs	t Name	Middle	Name	La	st Name				
Debtor (Spouse		andon J. Mart	indale Middle	Name	La	ist Name				
United	States Bankrupt	tcy Court for the:	NORTHE	RN DISTRICT (OF ILLING	DIS				
Case n	number									
(if known)								_	neck if this is an nended filing
State Be as c	omplete and acation. If more s	Financial Accurate as possi	ble. If two ma	arried people a	are filing	together, both	are eq	ually responsib		4/10 lying correct name and case
numbei Part 1:	<u> </u>	swer every ques About Your Ma		and Where You	ı I ived R	efore				
		ent marital statu		ma Where Tot	I LIVEU D					
_	•									
_	Married Not married									
2. Du	ring the last 3 v	years, have you	lived anywhe	ere other than	where vo	u live now?				
		, , ,								
-	No Vec List all o	f the places you I	ived in the lac	t 3 years Don	ot include	where you live	now.			
_		, ,		,	ot include	•				
D	ebtor 1 Prior Ad	ddress:		ates Debtor 1 ved there		Debtor 2 Prio	or Addre	ess:		Dates Debtor 2 lived there
	and territories inc	rears, did you ev lude Arizona, Ca re you fill out <i>Scl</i>	lifornia, Idaho	, Louisiana, Ne	vada, Ne	w Mexico, Puer				? (Community property sconsin.)
Part 2		Sources of You		,						
	· ·									
Fill	I in the total amo	income from en bunt of income you int case and you	u received fro	m all jobs and	all busine	sses, including	part-tim	ne activities.	ious caiend	aar years?
■	No Yes. Fill in the	e details.								
			Debtor 1					Debtor 2		
			Sources of Check all tha			income e deductions ar ions)		Sources of incor Check all that app		Gross income (before deductions and exclusions)
From	January 1 of cu	rrent year until	■ Wages, o	commissions,		\$1,866.0	00 [☐ Wages, comm	nissions,	\$7,758.32

bonuses, tips

☐ Operating a business

bonuses, tips

☐ Operating a business

the date you filed for bankruptcy:

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Document Page 34 of 50 Janice L. Martindale Debtor 1 Debtor 2 **Brandon J. Martindale** Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$11,096.00 \$40,736.31 □ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$7,708.00 \$32,718.00 Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 2 Debtor 1 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

Creditor's Name and Address

Dates of payment

attorney for this bankruptcy case.

Total amount paid

Amount you still owe

Was this payment for ...

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Deb	otor 2 Brandon J. Martindale		Cas	e number (if known)				
	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and							
	alimony.NoYes. List all payments to an insider.							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	nis payment		
	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		ments or transfer a	ny property on a	ccount of a deb	ot that benefited an		
	■ No□ Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credite			
Part	t 4: Identify Legal Actions, Repossessio	ns, and Foreclosures						
	Within 1 year before you filed for bankrup List all such matters, including personal injury modifications, and contract disputes.							
	□ No■ Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency		Status of the	case		
	Centegra Hospital McHenry v. Brandon Martindale et al 16SC2433	Collections	22nd Judicial C McHenry Count 2200 N. Semina Woodstock, IL	ty nry Ave.	■ Pending □ On appea □ Concluded			
	Within 1 year before you filed for bankrup Check all that apply and fill in the details belo		erty repossessed, fo	oreclosed, garnis	shed, attached,	seized, or levied?		
	■ No. Go to line 11.□ Yes. Fill in the information below.							
	Creditor Name and Address	Describe the Property		Date		Value of the property		
		Explain what happened				p.op.o.y		
	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No Yes. Fill in the details.		uding a bank or fin	ancial institution	ı, set off any an	nounts from your		
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was า	Amount		
	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possessi	on of an assigne	e for the benefi	it of creditors, a		

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Del	otor 2 Brandon J. Martindale		Case n	umber (if known)	
Par	t 5: List Certain Gifts and Contribution				
13.	Within 2 years before you filed for bankro No Yes. Fill in the details for each gift.	ptcy, did you give	e any gifts with a total value of r	more than \$600 per person	?
	Gifts with a total value of more than \$60 per person	Describe	the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankro No Yes. Fill in the details for each gift or co		e any gifts or contributions with	a total value of more than	\$600 to any charity?
	3			D-1	Malara.
	Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	tal Describe	what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankru or gambling? No Yes. Fill in the details.	tcy or since you	filed for bankruptcy, did you los	se anything because of the	ft, fire, other disaster,
	Describe the property you lost and how the loss occurred	nclude the amoun	urance coverage for the loss it that insurance has paid. List per on line 33 of Schedule A/B: Proper		Value of property lost
Par	t 7: List Certain Payments or Transfers				
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition p	eparing a bankru	uptcy petition?		rty to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	transferre	ion and value of any property ed	Date payment or transfer was made	Amount of payment
	McKenna Storer 1004 Courtaulds Dr. Suite A Woodstock, IL 60098 Debtor@mckenna-law.com	Attorne	y Fees	3/2017	\$1,600.00
17.	promised to help you deal with your cred Do not include any payment or transfer that	tors or to make p	payments to your creditors?	f pay or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid Address	Descripti transferre	ion and value of any property ed	Date payment or transfer was made	Amount of payment

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Janice L. Martindale Debtor 2 Brandon J. Martindale

Case number (if known)

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.									
	Person Address	Who Received Transfer		Description and property transfer			payme	ibe any property or ents received or debts n exchange		Date transfer was nade
	Person's	s relationship to you								
19.	beneficia ■ No	years before you filed for bankrup yry? (These are often called asset-pro			ny property to a	a self	f-settle	d trust or similar device	of v	which you are a
	Yes. Fill in the details.									
	The second secon						Date Transfer was nade			
Par	t 8: Lis	t of Certain Financial Accounts, In	strun	nents, Safe Deposi	t Boxes, and S	toraç	ge Unit	:s		
20.		year before you filed for bankrupto	y, we	ere any financial ac	counts or inst	rume	ents he	eld in your name, or for y	our/	benefit, closed,
	Include o	ved, or transferred? hecking, savings, money market, opension funds, cooperatives, asso					deposi	t; shares in banks, cred	it ur	nions, brokerage
	■ No □ Yes	Fill in the details.								
		Financial Institution and G (Number, Street, City, State and ZIP		t 4 digits of ount number	Type of acco	ount (or	Date account was closed, sold, moved, or transferred		Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No									
	☐ Yes	Fill in the details.								
		Financial Institution (Number, Street, City, State and ZIP Code)		Who else had acc Address (Number, S State and ZIP Code)		De	scribe	the contents		Do you still have it?
22.	Have you	stored property in a storage unit	or pla	ice other than you	home within 1	1 yea	ır befor	re you filed for bankrupt	cy?	
	Yes	Fill in the details.								
	Address (Number, Street, City, State and ZIP Code) to Ac		to it?	to it? Address (Number, Street, City,		scribe	scribe the contents		Do you still have it?	
	Storage Ringwo					Mi	sc. ho	usehold goods		□ No ■ Yes
Par	t 9: Ide	ntify Property You Hold or Control	for S	Someone Else						
23.	Do you h	old or control any property that so one.	meor	ne else owns? Incl	ude any prope	rty y	ou bori	rowed from, are storing	for,	or hold in trust
	□ No									
	Yes	Fill in the details.								
	Owner's	Name 6 (Number, Street, City, State and ZIP Code)		Where is the prop (Number, Street, City, S Code)		De	scribe	the property		Value

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Where is the property? **Owner's Name** Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) **Craig Ludwick** 2618 Myang Ave 2016 Chevy Cruze \$0.00 2618 Myang Ave. McHenry, IL 60050

Case number (if known)

Part 10: Give Details About Environmental Information

McHenry, IL 60050

Debtor 2

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of when	they occurred.			
24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental						
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any release of hazardous material?					
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.					
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name	Nature of the case	Status of the case		

Part 11: Give Details About Your Business or Connections to Any Business

27.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
	☐ A partner in a partnership
	☐ An officer, director, or managing executive of a corporation
	☐ An owner of at least 5% of the voting or equity securities of a corporation

Address (Number, Street, City,

Entered 03/17/17 10:46:53 Desc Main Case 17-80607 Doc 1 Filed 03/17/17 Page 39 of 50 Document Janice L. Martindale Debtor 1 Debtor 2 Brandon J. Martindale Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. **Address** (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Janice L. Martindale /s/ Brandon J. Martindale Brandon J. Martindale Janice L. Martindale Signature of Debtor 1 Signature of Debtor 2 Date Date March 17, 2017 March 17, 2017

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1	Janice L. Martind	ale		
	First Name	Middle Name	Last Name	
Debtor 2	Brandon J. Martir	ndale		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				☐ Check if this is an

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Janice L. Martindale Debtor 2 Brandon J. Martindale	Case number (if)	Case number (if known)			
name:	Details the property and redeem it	□ v _{**}			
name.	☐ Retain the property and redeem it.☐ Retain the property and enter into a	☐ Yes			
Description of	Reaffirmation Agreement.				
property	☐ Retain the property and [explain]:				
securing debt:					
Part 2: List Your Unexpired Personal Proper	•				
n the information below. Do not list real estate	you listed in Schedule G: Executory Contracts and Une leases. Unexpired leases are leases that are still in effectly lease if the trustee does not assume it. 11 U.S.C. § 36	ct; the lease period has not yet ended.			
Describe your unexpired personal property lea	ases	Will the lease be assumed?			
Lessor's name:		□ No			
Description of leased		_			
Property:		☐ Yes			
Lessor's name:		□ No			
Description of leased Property:		☐ Yes			
Lessor's name:		□ No			
Description of leased		-			
Property:		☐ Yes			
Lessor's name: Description of leased		□ No			
Property:		☐ Yes			
Lessor's name:		□ No			
Description of leased Property:		☐ Yes			
Laggaria nama					
Lessor's name: Description of leased		□ No			
Property:		☐ Yes			
Lessor's name:		□ No			
Description of leased Property:		☐ Yes			
Dot 2: Cian Bolow					
Part 3: Sign Below Inder penalty of perjury, I declare that I have in	ndicated my intention about any property of my estate th	at secures a debt and any personal			
property that is subject to an unexpired lease.		• •			
X /s/ Janice L. Martindale Janice L. Martindale	X /s/ Brandon J. Martindale Brandon J. Martindale				
Signature of Debtor 1	Signature of Debtor 2				
Date March 17, 2017	Date March 17, 2017				

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Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
-	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-80607 Doc 1 Filed 03/17/17 Entered 03/17/17 10:46:53 Desc Main Document Page 46 of 50

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Janice L. Martindale Brandon J. Martindale		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPI	ENSATION OF ATTO	RNEY FOR DI	EBTOR(S)
co	arsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the file rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy	, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,600.00
	Prior to the filing of this statement I have received			1,600.00
	Balance Due			0.00
2. Ti	ne source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. Tl	ne source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
1. ■	I have not agreed to share the above-disclosed con	nnensation with any other nersor	unless they are mem	thers and associates of my law firm
5. Ir a. b. c. d.	I have agreed to share the above-disclosed competed copy of the agreement, together with a list of the natural return for the above-disclosed fee, I have agreed to an all the Analysis of the debtor's financial situation, and renewhere Preparation and filing of any petition, schedules, stated Representation of the debtor at the meeting of credarily [Other provisions as needed] Fee includes filing fee, credit report, Careditors to reduce to market value; exapplications as needed; preparation and non-bousehold goods. You agreement with the debtor(s), the above-disclosed the Representation of the debtors in any description.	ames of the people sharing in the render legal service for all aspect dering advice to the debtor in de atement of affairs and plan which itors and confirmation hearing, a redit Counseling and Managemption planning; preparand filing of motions pursual fee does not include the followin	te compensation is attacted to the bankruptcy of the bankruptcy of termining whether to the may be required; and any adjourned heat gement Course. Notion and filing of root to 11 USC 522(f) g service:	ached. case, including: file a petition in bankruptcy; arings thereof; legotiations with secured eaffirmation agreements and by(2)(A) for avoidance of liens
	any other adversary proceeding.			•
	certify that the foregoing is a complete statement of ϵ and an arrangement of the complete statement of ϵ	CERTIFICATION any agreement or arrangement for	r payment to me for 1	representation of the debtor(s) in
Ма	rch 17, 2017	/s/ Jaime Dowell		
Da		Jaime Dowell Signature of Attorn McKenna Storer 1004 Courtaulds Suite A Woodstock, IL 6 815-334-9690 Fa Debtor@mckenn	Dr. 0098 ax: 815-334-9697	

Case 17-80607 Doc 1 Filed 03/17/17 Entered 03/17/17 10:46:53 Desc Main Document Page 47 of 50 Page 47 of 50

United States Bankruptcy Court Northern District of Illinois

In re	Janice L. Martindale Brandon J. Martindale		Case No.	
		Debtor(s)	Chapter	7
	VER	IFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors: _	21
	The above-named Debtor(s) he (our) knowledge.	ereby verifies that the list of credi	tors is true and	correct to the best of my
Date:	March 17, 2017	/s/ Janice L. Martindale		
		Signature of Debtor		
Date:	March 17, 2017	/s/ Brandon J. Martindale		
		Brandon J. Martindale Signature of Debtor		

A/r Concepts 18-3 E Dundee Rd Barrington, IL 60010

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Americollect Inc Po Box 1566 1851 S Alverno Rd Manitowoc, WI 54221

Americollect Inc Po Box 1566 1851 S Alverno Rd Manitowoc, WI 54221

Armor Systems Co 1700 Kiefer Dr Ste 1 Zion, IL 60099

Capital One Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

CCI/Contract Callers Inc Po Box 3000 Augusta, GA 30903

Centegra Health System Centegra Hospital - Woodstock PO Box 1990 Woodstock, IL 60098

Certified Services Inc Po Box 177 Waukegan, IL 60079 Credit Management, LP
The Offices of Credit Management, LP
Po Box 118288
Carrolton, TX 75011

ERC/Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256

H & R Accounts, Inc Po Box 672 Moline, IL 61265

H & R Accounts, Inc Po Box 672 Moline, IL 61265

H & R Accounts, Inc Po Box 672 Moline, IL 61265

H & R Accounts, Inc Po Box 672 Moline, IL 61265

H&R Accounts Inc. 7017 John Deere Parkway Moline, IL 61265

H&R Accounts Inc. 7017 John Deere Parkway Moline, IL 61265

Oac Attn: Bankruptcy Po Box 500 Baraboo, WI 53913

Oac Attn: Bankruptcy Po Box 500 Baraboo, WI 53913 Stanislaus Credit Control Service, Inc. Po Box 480 Modesto, CA 95353